PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

		Eneci										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THA				
TOTAL CLAIMS			23		ŀ		•	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			23 minus 20=		• 3			X\$ 9=	W	OR	X\$18=	
	EPENDENT CL		U minus 3 =		* 0	2		X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2		TOTAL	42	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL I	ENTITY	OR	OTHER SMALL E	
AMENDMENT A	5/21/07	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	Minus	** C	23	=		X\$.9=		OR	X\$18=	
	Independent	· 2	Minus	***	3_	= -		X43=		OR	X86=	,
	FIRST PRESE	NTATION OF MI	JUITPLE DEF	ENDENI	CLAIM		·	+145=	X.	OR	+290=	·
								TOTAL	/\	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)		ADDIT. FEE	/		ADDII. PEET	
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=.	╽╽	X\$.9=		OR	X\$18=	
	Independent	*	Minus	***	CLAINA	=	┨┃	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ا ل	+145=	•	OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] }					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	ii ine mignest Nu	mber Previously Pa	alu For IN IMI id For" (Total o	o orace i	Bill eeu (too	ii J, Ellel J. hichest numbe	er foi	and in the and	ropriate box	in col	umn 1.	